

Fire Inspection Request: Child Care Facility

The South Carolina Department of Social Services, Child Care Regulatory Services, requests a Fire Inspection on behalf of the facility named below.

TYPE OF FACILITY:	<input type="checkbox"/> Child Care Center (13 or more children)	<input type="checkbox"/> Group Child Care Home
	<input type="checkbox"/> Church <input type="checkbox"/> Registration <input type="checkbox"/> License	<input type="checkbox"/> Family Child Care Home

Name of Facility	County	Days of Operation
Facility Address		Phone #
Mailing Address, if different from above		
Name of Director/Operator		Hours of Operation

Directions for locating facility: *(Include specific details indicating nearby landmarks when facilities are in isolated rural areas or other hard to find locations. Use back of form if necessary.)*

Name and Telephone # of Facility Contact Person:

☐ Director ☐ Operator ☐ Sponsoring Agency Rep ☐ Owner ☐ Buyer ☐ Other

Please check type of inspection requested:

☐ New Application ☐ New Construction ☐ Renovation ☐ Follow-up ☐ Complaint

[] Renewal _____
(Date)

(Date of Request)